

TO: NH Medicaid Providers
FROM: Kathleen Dunn, RN, MPH - Associate Commissioner, Medicaid Director
RE: Regular Update #5: MCM Open Enrollment

Background

The Department of Health and Human Services is launching the Medicaid Care Management (MCM) Program on December 1, 2013.

The program start date is the first day that Medicaid recipients enrolled with one of the three Health Plans will be covered under their respective Health Plan. Open Enrollment will begin September 11, 2013 (electronically for NH EASY account holders) and starting September 16, 2013 for recipients of hard copy notifications. Open Enrollment is a minimum of 60 day window that affords Medicaid recipients with a participation status of mandatory or voluntary to examine the Health Plan offerings and inform DHHS of their Health Plan selection (see the *Recipient Participation Guide* available on the MCM webpage under Resources for more information). Voluntary recipients – those with the option to opt out of MCM – must inform DHHS if they wish to opt out. Voluntary clients that do not select a plan or do not inform DHHS of their decision to opt out of participation will be autoassigned to a Health Plan prior to the start of the program. Medicaid recipients can call the Enrollment Call Center at 1-888-901-4999 to enroll, or mail in an enrollment form (more information below) or use an online account through NH's Electronic Application System (EASY).

Open Enrollment-Notification to Clients

Medicaid recipients with a Mandatory or Voluntary participation status in the program will receive notification of their opportunity to make a selection.

Mandatory and Voluntary program participants will receive notification either through the NH Electronic Application System (EASY) online, hard copy in the mail or both online and in the mail. Each notification, referred to as the "Enrollment Packet", will contain:

Title of the Notification	Documents Enclosed	Information Contents
Enrollment Packet	<ul style="list-style-type: none"> Case specific letter Enrollment Form Postage paid envelope Information on all 3 Health Plans Frequently Asked Questions 	<ul style="list-style-type: none"> Participation status of household members 60 days to select before autoassignment Tips on how to select a Health Plan Methods for selection of a Health Plan and a PCP

The enrollment form will be prepopulated with the names of each household member (Mandatory or Voluntary) with their specific options to select.

Open Enrollment-Notification to Clients contd'

A resource titled *Meet Your Health Plans* will describe each Health Plan and highlight their optional programs and incentives for healthy behaviors. Additionally, the packet will include a document containing Frequently Asked Questions (FAQs) that will explain basic information about the program, along with helpful tips on making a selection. To view sample enrollment packets, visit the DHHS webpage at www.dhhs.nh.gov and click on the MCM logo.

Medicaid recipients excluded/exempt from participation in the MCM program will not be listed on the notification. They will not receive an Enrollment Packet if they are the only member of a household.

Important Dates for Open Enrollment

MCM Open Enrollment – September 11, 2013 through November 11, 2013		
Date	Title of Notification	Notification to Medicaid Recipients
Released starting on September 11	Enrollment Packets (electronic transmission)	Enrollment Packets sent to all NH EASY account holders – Open Enrollment begins.
Released on September 12	Confirmation Letters	Letters confirming the selection of a Health Plan will be issued to NH EASY account holders who have selected a Health Plan. Medicaid recipients with a NH EASY account who have not elected to “GO GREEN,” will receive hard copies in the mail once they have made their selection.
Starting on September 16	Enrollment Packets (hard copy mailing)	Hard copies of Enrollment Packets begin arriving in the mailboxes of Medicaid recipients who do not have NH EASY accounts.
Starting on October 6	Reminder Letters	Letters reminding Medicaid recipients to self-select will be released on NH EASY and hard copies will begin to be mailed.
Starting on November 12	Confirmation Letters for autoassigned clients	Letters mailed to Medicaid recipients identifying the Health Plan they have been assigned. Letter includes a description of what to expect next and what to do if the recipient would like to select a different plan. Voluntary recipients who were autoassigned will be advised that they can elect to opt out of participation in the program

Self-Selection

DHHS is encouraging Medicaid recipients to be active participants in the selection process. MCM program self-selection means the client chooses a Health Plan or -in the case of some Voluntary participants - decides to “opt in” of the participation in the program.

In order to support the Medicaid client’s active self-selection, the DHHS is sending a reminder letter approximately 30 days into the Open Enrollment period. This letter will be targeted to those Medicaid recipients who have yet made a selection.

Additionally, DHHS is offering a series of training sessions that will inform providers of the Open Enrollment process and how to engage their clients in making an active and informed decision.

**Self- Selection
Contd'**

Assisting your client in making a selection may include:

- 1) **Working with the client to examine the client's current situation**, including assessing their relationships and preferences for providers and if they have specific health needs or concerns, as well as if other members of their household will be participating in the program. Another consideration is if they have a caregiver that they may want to include in the decision making process.
- 2) **Guiding the client** to the available resources to review the offerings of the Health Plans. This includes assessing the provider networks for preferred providers and specialties and reviewing the optional programs, services and incentives for healthy behaviors for what will best align with the client's health needs and goals. This includes checking the provider directories to see which providers are enrolled with each Health Plan. Provider directories are available at www.nheasy.gov and through the Enrollment Call Center.
- 3) **Reminding the client** that if they do not make an active selection in the Open Enrollment period, they will be autoassigned to a plan and that autoassignment is a default position - not an informed decision. Through examination of their options, they will be better informed of what services are available to them and how to access them
- 4) **Helping to facilitate the client's enrollment action** whenever it is possible and when a client requests assistance.

Another available resource to clients is the Enrollment Call Center, which is staffed with individuals ready to offer one-to-one assistance with an unbiased perspective on the Health Plans and their offerings. The Call Center staff can find a provider in the provider directories and, if the client is ready, can process their selection.

For more information on how to assist your clients, review the training opportunities in the Upcoming Events section of this update. The presentation and training materials will be available on the Department's website following the close of the first training.

**Choose Primary
Care Provider
(PCP)**

When a Medicaid recipient is selecting a Health Plan, they will be asked to select a PCP at the same time.

Calling the Enrollment Call Center will enable the client to check the provider directories, discuss the Health Plan options, and to select their PCP all at the same time. Selection of a PCP at the time of enrollment in a Health Plan is optional. If the client does not select a PCP they will be able to work with their Health Plan to make a selection.

To "Opt Out"

Voluntary Medicaid recipients electing to "opt out" out of participation in the program at this time will only be required to inform DHHS of this preference.

A Voluntary program participant, whether they choose to select a Health Plan or not, will retain the option to opt out of or into program participation as long as they maintain their Medicaid eligibility and Voluntary participation status in the Medicaid program. Medicaid recipients who do not self-select to opt out will be assigned to a Health Plan automatically at the close of the Open Enrollment period.

Recipients who choose to opt out will continue their coverage through current NH Medicaid until such time that the Department launches the second phase of the program, scheduled to occur in approximately one year.

Confirmation of Enrollment

When a Medicaid recipient has completed their enrollment, they will receive notification in the mail that informs the client that their selection has been made and informs them what they can expect next.

This notification informs the Medicaid recipient that if there has been an error in their selection or they have changed their mind, they have a period of 90 days to switch their Health Plan.

If a client selects a PCP at the time of enrollment, it can be verified through their Health Plan. If the client would like to change their PCP to another provider in the Health Plan network, they can contact the Health Plan's member services to facilitate that process at any time.

After the confirmation of enrollment, the Medicaid recipient can anticipate:

- 1) Receipt of a Health Plan card, letter from the Health Plan including, a Member handbook; and
- 2) A call from their Health Plan;
- 3) Contact from a case manager to initiate care coordination activities for clients with more complex medical needs.

The Member Handbook

Each Health Plan has developed a Member Handbook. This Handbook is an important resource for clients as they begin receiving services through the Health Plan.

The Member Handbook includes:

- Information about the role of their PCP;
- A full list of benefits and services with an explanation of any service limits or exclusions, available in hard copy or online;
- Information on how to access services and referrals for specialist care and more; and
- An explanation of member rights and protections, including grievance processes.

New Resources Available

Visit the MCM webpage – just follow the MCM logo from the DHHS home page - for up-to-date resources.

Resources include sample client notifications, including the Enrollment Packet with its related resources, including: *Meet the Health Plans*; *Frequently Asked Questions*; and the reminder and confirmation letters that clients will receive.

Additionally as mentioned in the “Background” of this update, *The Recipient Participation Guide* can be also be found on the MCM webpage under “Resources.”

Watch the MCM webpage for the recorded webinar training on *How to Assist Clients* to enroll in a Health Plan and its accompanying training materials.

Medicaid Recipient Communications

Sample notifications that will be distributed to Medicaid recipients beginning on September 11, 2013, is available on the DHHS MCM webpage – just follow the MCM logo from the home page.

DHHS is sharing key messages about the transition through social media mediums, Facebook and Twitter. If your client is looking for more information and uses social media, please direct them to find DHHS on Facebook at:

www.facebook/DepartmentOfHealthAndHumanServices.com

Or to follow us on Twitter at:

[@NHMedicaidCM](https://twitter.com/NHMedicaidCM)

**Upcoming
Events**

DHHS is partnering with the University of New Hampshire to offer a series of MCM trainings.

The first of the training sessions, titled “How to Assist Your Clients: Navigating MCM Open Enrollment” will be held on September 11, 2013 and September 12, 2013. **In-person registration for these trainings is closed.** However, the webinar option is available through the close of business September 9, 2013. Both the in-person and webinar attendance options are available for the two additional trainings scheduled to occur during the Open Enrollment period, on **October 8 and 9.**

Training space is limited so please share this information with your front line staff and visit https://www.events.unh.edu/RegistrationForm.pm?event_id=15461 to make your reservation.

On Tuesday, October 29, 2013 and Thursday, October 31, 2013 two repeat training sessions will focus on the variation of business processes under MCM. More information will be forthcoming, including information how to reserve your in-person or webinar attendance And who on your staff will benefit from the training.

Upcoming News

The next Regular Update is scheduled to be released on September 16th. This communication will focus on the Managing Business Processes.
